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FEC FORM 1

STATEMENT OF ORGANIZATION

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FFC Office UserOnly

1. NAME OF	(Check if name	Example: If tuning tune		MIE OFIAICK
COMMITTEE (in full)	is changed)	Example: If typing, type over the lines.	12FE4M5	
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		CITY	STATE	ZIP CODE
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2. DATE 06 2	å ´ àò i `à			
3. FEC IDENTIFICATION NU	JMBER C			
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	NEW 40	AMENDED (A)		
4. IS THIS STATEMENT X	NEW (N) OR	AMENDED (A)		
I certify that I have examined th	is Statement and to the bes	t of my knowledge and belief	it is true, correct	and complete.
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Type or Print Name of Treasure	, Michael)	backson		
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Signature of Treasurer	Muchan of	arkly	Date D	5 25 2012
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NOTE: Submission of false, errone	eous, or incomplete information	may subject the person signing	this Statement to	the penalties of 2 U.S.C. §437g.
	ANY CHANGE IN INFORMATI	ON SHOULD BE REPORTED	WITHIN 10 DAYS.	
Office		For further information	contact:	EEC EODM 1
Use Only		Federal Election Commit Toll Free 800-424-9530		FEC FORM 1 (Revised 02/2009)